



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

2/9/2015

Betty Godard
327 Paula Ln NE
Cedar Rapids IA 52402

Dear Betty,

This letter is in regards to the compliance check of your Level B, Registered Child Development Home completed on 1/13/15. At this time a Child Development Home Safety Plan was completed. That plan addressed four major safety concerns and an agreement with the provider that the four items would be fixed by no later than the following Monday, 1-19-15. A follow up visit was completed on 1/22/15 to review the immediate safety concerns. They had all been completed. Those items are included in this letter but they are checked off as completed. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. I am also including a copy of the safety plan which you signed at the time of my visit. The following areas were out of compliance at the time of my visit:

☒ 110.5(1) Conditions in the home are safe, sanitary, and free of hazards.

1/13/15--visit the back door was nailed shut. It could not be opened. Provider was told to fix by the end of the day. This was agreed to on the Child Development Home Safety Plan.

1-29-15 This was fixed and the door was no longer nailed shut on my follow up visit.

☐ 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child.

1/13/15 You had cleaning supplies which were poisonous, toxic or otherwise unsafe materials within access of children, sitting on the kitchen counter. These need to be in a location with secured access from children.

☒ 110.5(1)e Electrical wiring shall be maintained.

1/13/15--One outlet was cracked and had pieces chipped off. A cap would not fit into it. You did tape it over for safety and said you would have a certified electrician change it out by 1-23-15.

1/29/15 this was fixed on my follow up visit.

☐ 110.5(1)e All accessible electrical outlets are safely capped.

1/13/15--Needed caps on outlets all rooms. There were many outlets that needed to be capped throughout the home. All outlets should be capped every day to ensure child safety.

☐ 110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits. **1/13/15--Need at the secondary exits .**

☐ 110.5(1)j The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas. **1/13/15--Need the required details on the second plan.**

☐ 110.5(1)k Fire and tornado drills are practiced monthly and documentation kept. **1/13/15--Need to do drills and document monthly. Provider said she has been doing that but the records were at her home. She had taken some things home to work on. She will bring them back to the day care residence.**

☐ 110.5(1)m Has not less than one 2A 10BC rated fire extinguisher in a visible and readily accessible place on each child-occupied floor. **1/13/15--Need correct size. This was a part of the Child Development Home Safety Plan. Provider agreed to obtain one by 1-19/15. 1/29/15 Provider had obtained the correct size.**

☒ 110.5(1)n Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. **1/13/15--Need one in all of the rooms. Provider had none up in the home. She did have a couple in the kitchen cupboard in boxes and said she would have them put up by the end of the day and would have them in every room of the child care residence as she is using every room. The kitchen and bathroom do not need smoke detectors. This was a part of the Child Development Home Safety Plan. Provider agreed to have them by end of day on 1/13/15. 1/29/15 this was fixed at return visit.**

☐ 110.5(1)n Each smoke detector has been installed according to manufacturer's recommendations. **1/13/15--Need to install according to manufactures recommendations. Were in the box in the kitchen cabinets.**

☐ 110.5(1)n Each smoke detector is tested monthly, and a record is kept for inspection purposes. **1/13/15--Need to test and document the testing monthly.**

☐ 110.5(1)o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and www.iowasmokefreeair.gov. **1/13/15--Need on the following doors: back door. Suggest you contact CCRR and ask for their window clings.**

☐ 110.5(1)u The provider has written policies about caring for mildly ill children and the exclusion of children due to illness, and informs parents of policies. **1/13/15--Provider sates she has developed the policies but they are with her stuff she was working on at her home residence. These need to be maintained at your child care home.**

☐ 110.5(1)v The provider has written policies about responding to health-related emergencies. **1/13/15 Provider sates she has developed the policies but they are with her stuff she was working on at her home residence. These need to be maintained at your child care home.**

Items “u and v” address the need to have written policy on children who are mildly ill and how you would respond to health related emergencies. Please develop those policies to share with your families. You can see samples of this in the guidebook on page, 54 for children who are mildly ill and page 53 for health related emergency policies. You should prepare something similar to these to address the rules/policies of your program. Many providers use what the local school uses for ill policies. That makes it easy on both you and the parents because they know those rules usually.

Health Related Emergency Policy ----Sample

In the event of a minor health related emergency (ie: bloody nose, scraped knee, minor cut) I will use my first aid CPR training as needed. I will complete an injury report form and give to the parent at time of pick up along with calling or texting the parent after the child's needs have been dealt with.

In the event of a health related emergency that exceeds my ability, I will call the parent/guardian/ or (emergency contact person if the parent can not be reached) for further directions.

In the event of a life threatening health emergency I will call 911 and call the parent as soon as possible. If the child is required to be transported for medical attention they will go via ambulance unless the parent /guardian/ emergency contact has arrived and can make the determination for transportation. I will stay with the other children in care.

The above policy illustrates why I must maintain accurate information on all phone numbers and addresses for parents, guardians, and emergency contact persons along with medical providers for your child. Please ensure that is accurate at all times.

I maintain a valid CPR and First aid certificate along with a first aid kit to meet the needs for minor injuries.

I will complete an injury report form and send a copy home with the family and retain one for the child's file if first aid is applied due to an injury.

☐ 110.5(2) A provider file is maintained and contains:

☐ 110.5(2)a A physician's signed **statement of health and immunization status** on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated every three years. **1/13/15--Need and on the new form which I left a copy of.**

110.5(2)b Certificates or training verification documentation for:

☐ 110.5(2)b During the first year of registration – 12 hours of approved training. At least six hours shall be in a group setting. Two of the twelve hours must be health and safety training. A specific training shall not be used to meet requirements more than one time every five years. **1/13/15--Has 0 training hours need 12 hours for the year. This was a part of the Child Development Home Safety Plan. Provider agreed to look for training and complete 24 hours of approved training by 4/1/15.**

1/29/15 Provider had not found any trainings as of yet.

☐ 110.5(2)b During the second year of registration and each succeeding year, twelve hours of approved training. At least six hours shall be in a group setting. If the provider has documentation of completing the ChildNet, PITC, or Beyond Business Basics series, these hours may be used to fulfill two year's training requirements, not including first aid/CPR and mandatory reporter training. A specific training shall not be used to meet requirements more than one time every five years. **1/13/15--Has 0 training hours need 12 hours for the year. Providers renewal is 4-1-15 by that date you need 24 hours of approved training, not counting first aid / CPR or mandatory child abuse training. I am enclosing the training information from HACAP for your use. This was a part of the Child Development Home Safety Plan. Provider agreed to look for training and complete 24 hours of approved training by 4/1/15.**

1/29/15 Provider had not found any trainings as of yet.

110.5(8) Children's Files

110.5(8) An individual file is maintained for each child and **updated annually or when there are changes**. Each file contains: **The children's files must be updated annually with the emergency medical authorization completed yearly. If the parent wants to review, edit and re-sign and date the intake and emergency medical**

authorization instead of completing a new form that is ok. I suggest you pick a date, such as the first of the year, beginning of school, your birthday or anniversary, Valentine's Day, etc. On that date I suggest you double check for a current physical form and immunizations (if there were any updates) and have the parents redo or re-sign the emergency medical and intake information.

1/13/15—Provider was missing the files for 10 children. Provider said 5 were at the other house because she had been working on them and 5 still needed to obtain the information from the parents.

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number. **1/13/15--Need for all children as nothing is current and nothing at all for 6 children.**

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency. **1/13/15-- Need for all children as nothing is current and nothing at all or not all required information for 11 children.**

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment. **1/13/15 Need for all children as nothing is current and nothing at all for 9 children.**

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance. **1/13/15--Has for 3 children: CS, JW, KR, and Need for the other 6 children.**

☐ 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian. **1/13/15--Has for 2 children DP, and KH & Need for: AW, DW, NR, TB.**

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually. **1/13/15--Has for 1 child --Need for 7 CHILDREN: KR, KR, CW, NC, IT, LM, TH.**

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical. **1/13/15--Need for all children but DP since you have a current physical for DP.**

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child. **1/13/15--Need for all children as they all need an update. Had no information on 6 children.**

☐ 110.5(8)g A signed and dated immunization certificate provided by the state department of public health. **1/13/15--Need for 8 children: LM, NC, IT, KR, CW, AW, DW, NR.**

☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since. **1/13/15--Need for 4 CHILDREN: AW, DW, NR, TB.**

☐ 110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the

child. **1/13/15--** You need written permission every time you leave the premises. The underlined items must be addressed each time. I suggest you use a general permission request and include per the monthly calendar. Then have each parent sign off on your monthly calendar with your routine trips, before the activities are completed. Any special activities can be added to the calendar. **NEED THE COMPLETE INFORMATION ON ALL CHILDREN**

☐ 110.9(1) SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "B"

☐ 110.9(3) Facility requirements

☒ 110.9(3)c Minimum of two direct exits to the outside from the main floor. **1/13/15 The second exit was nailed shut by a board at the base of the door to keep animals out of the pet door. It would not allow the door to open. Provider agreed to remove it that evening. This was a part of the Child Development Home Safety Plan.**

1/29/15- This was fixed and no longer an issue.

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☒ Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home. This visit will occur after the 45 day time period has elapsed.

Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.

I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.

Please sign and date below, and return this form in the provided envelope by: 45 days of receipt.

X _____
Signature Date

Please do not hesitate to contact me at DHS at 319-892-6826 if you have any questions regarding this letter.

Sincerely,

Lisa Wesbrook
Social Worker II

Irene Holzwarth
Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 866-324-3236.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://dhs.iowa.gov/sites/default/files/CC_Professional_Development.pdf and you can sign up for training at <http://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).